Image# 28990826543

FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1	`	(See instructio										
		(See Instructio	115)					Offic	ce use only	/		
NAME OF COMMITTEE (in	n full)	(Check if name is changed)		nple: If typyin the lines	g, type	12Fl	E4M5	'				
Graves for C	ongress						ш		ш			لب
		11111					ш					لــــا
ADDRESS (number and	d street) 234	5 Grand, Suite 2	400 						ш			لـــا
(Check if add	dress				ш		ш	ш	ш			шШ
is changed)	Kan	sas City		ш	ш	MC		Ш	6410	8		ш
COMMITTEE'S E-MA	AIL ADDRESS		CITY			STATE	•		ZIP	CODE	•	
												ш
1	111111	11111	1 1 1		1 1 1	1.1	1 1	1 1		1 1	1	1
COMMITTEE'S WEE	B PAGE ADDRESS (I	JRL)									•	
								1 1				لــــا
	<u> </u>	11111	111	1111	1 1 1 1	1 1	1 1	1 1	1 1 1	1 1	ı	ш
2. DATE 0	M / D D / 3	2 0 0 8										
3. FEC IDENTIFIC	ATION NUMBER	[C COO	359034								
4. IS THIS STATE	MENT NE	W (N) OR	X	AMENE	DED (A)							
I certify that I have exar Type or Print Name of	nined this Statement an	d to the best of my kno	J	d belief it is tru	ie, correct ar	nd comple	ete					
,							М	M /	D D	/ Y	Υ	Y Y
Signature of Treasure	er Electronically Fil	ed by Jean Paul	Bradsh	aw		Date	0.4	1	^D 1 ^D 5	L	2 (0 8
NOTE: Submission of t	alse, erroneous, or inco	mplete information ma			· ·		•		f 2 U.S.C	C. S437(g.	
Office Use Only				For further in Federal Elect Toll Free 800 Local 202-69	ion Commiss -424-9530				FEC I	FORI ed 02/20		

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5.	TYPE OF CO	MMITTEE (Check One)	
	(a) X	This committee is a principal campaign committee. (Complete the candidate information below.)	
	(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete t information below.)	he candidate
	Name of Candidate	Sam Graves	
	Candidate Party Affiliatio	n REP Office X House Senate President	State MO District 06
	(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	Name of Candidate		
	(d)	This committee is a (National, State (or subordinate) committee of the	(Democratic, Republican,etc.) Party.
	(e)	This committee is a separate segregated fund	
	(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregate committee.	ed fund or party
6.		Connected Organization or Affiliated Committee	1
 			1
_		5490 NW 96th Terrace	
	Mailing Addre	ss Lilia i i i i i i i i i i i i i i i i i i	
		Kansas City MO	64154 _
		CITY▲ STATE ▲	ZIP CODE
	Relationship	Joint Fundraising Committe	
	Type of Conn	ected Organization:	
	Corpo	oration Corporation w/o Capital Stock Labor Organ	ization
	Mem	bership Organization Trade Association Cooperative	

3)		Page 3
by name, address, (phone number -ks and records.	- optional), and position of th	e person in
Bradshaw		
2345 Grand, Suite 2400		
Kansas City	MO	64108
CITY A	STATE	ZIP CODE A
	816 Telephone number	460 5507
3radshaw 2345 Grand, Suite 2400		
Kansas City	MO	64108 _
CITY A	STATE	ZIP CODE A
	Telephone number 816	460 5507
CITY A	STATE A	ZIP CODE A
	by name, address, (phone number -ks and records. Bradshaw 2345 Grand, Suite 2400 Kansas City CITY A address (phone number optional) of gnated agent (e.g., assistant treasure) Bradshaw 2345 Grand, Suite 2400 Kansas City	by name, address, (phone number optional), and position of the sand records. Bradshaw 2345 Grand, Suite 2400 Kansas City MO CITY A STATE A address (phone number optional) of the treasurer of the comming gnated agent (e.g., assistant treasurer). Bradshaw 2345 Grand, Suite 2400 Kansas City MO CITY A STATE A 816

	FEC Form	1 (Revised 02	2/2003)																Pag	ge 4		
9.	Banks or Other safety deposit box Name of Bank, D	xes or maintair	ns funds.	banks or	other (depos	sitorie	s in w	hich t	пе со	mmitte	ee de	posits	fund	s, ho	lds a	accou	unts	, rer	nts		
		Bank o	f America	I 												L						
	Mailing Address		P.O. B	ox 4191	19					ш												
										ш												
			Kansa	s City						ш			M)			64	141				
					С	ITY	Δ					;	STATI	ĒΔ			Z	IP C	OD	E .	Δ	
	Name of Bank, D	epository, etc.																				
																				ш		
	Mailing Address															1					Ш	
																	ш				ш	
			1												ı					1		

CITY 🔼

ZIP CODE 🛕

STATE ▲

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Banks or Other Depositoric safety deposit boxes or main Name of Bank, Depository, e	tains funds.		ds accounts, rents
UMB	Bank, N.A.		
Mailing Address	1010 Grand		
	Kansas City	MO	64106
	CITY 🗖	STATE △	ZIP CODE 🛕
Name of Asso Comments of A	2		
Name of Any Connected C	Organization or Affiliated Committee		[ADDITIONAL]
ROMP 2008			
Mailing Address	228 S. Washignton Street		
	Suite 115		
	Alexandria	<u> </u>	22314
	CITY▲	STATE A	ZIP CODE
Relationship Joint	t Fundraising Comm		
Type of Connected Organization	ation:		
	Corporation w/o Capital Stock	Labor Or	ganization
Corporation Members hip Organ		Cooperate	ganization

Designated Agent		[ADDITIONAL]
Full Name		
Mailing Address		
Title or Position ▼	CITY A	STATE A ZIP CODE A
	Tel	elephone number

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Banks or Other Deposite safety deposit boxes or ma Name of Bank, Depository	aintains funds.	leposits funds, holds accounts, rents [ADDITIONAL]
0-	contrar Chile Bomb, N.A.	
	untry Club Bank, N.A.	
Mailing Address	P.O. Box 410889	
	Kansas City	MO 64141 _
	CITY A	STATE ZIP CODE A
Name of Any Connected	d Organization or Affiliated Committee	[ADDITIONAL]
Mailing Address		
Maining Addices		
	CITY▲	STATE ▲ ZIP CODE ▲
Relationship		
Type of Connected Organ	nization:	
Corporation	Corporation w/o Capital Stock	Labor Organization

Designated Agent			[ADDITIONAL]
Full Name			
Title or Position ▼	CITY A	STATE	
		Felephone number	